

**ISSUE SLIP STAPLE AREA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.L.P.E. CLASSIFIER</b>		59	16214
<b>FORMALITY REVIEW</b>		21423	1-12-5
<b>RESPONSE FORMALITY REVIEW</b>	CJ	1/10/01	3-27-01

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
✗ .....	Allowed	I .....	Interference
— (Through numeral) .....	Canceled	A .....	Appeal
+ .....	Restricted	D .....	Objected

Claim	Date
Final	
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
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